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FULLERTON FIRE DEPARTMENT HAZARDOUS MATERIALS DISCLOSURE FORM

GENERAL FACILITY INFORMATIONBUSINESS NAME: WOODMILL PRODUCTSADDRESS: 1551 E ORANGETHORPEMAILING ADDRESS: FULLERTON CA, 92631BUSINESS PHONE: 714-870-9050PRIMARY CONTACT: BRUCE WALKERTITLE: PLANT MANAGERPHONE#: WORK: 870-9050 HOME: PRVY-Controlled/PrivacySECONDARY CONTACT: STEVE HAMILTONTITLE: MAINTENANCE SUPERVISORPHONE#: WORK: 870-9050 HOME: PRVY-Controlled/Privacy*SIC#: 2499 **DUN AND BRADSTREET#: 06-313-5917DESCRIPTION OF BUSINESS OPERATION: WOOD PRODUCTS MFG.

*SIC#: Enter the primary Standard Industrial Classification (SIC) code number for your facility. If your business does not know this information, contact CAL OSHA Consultation Service at (312) 861-9993 to obtain your business SIC number.

**DUN AND BRADSTREET#: Enter the Dun and Bradstreet number for your business. If your business does not have this information, contact the Regional Office of Dun and Bradstreet at (714) 937-0869.

WE USE EXTREMELY HAZARDOUS SUBSTANCES/ACUTELY HAZARDOUS MATERIALS YES ☒ NO ☐THERE ARE SCHOOL(S)/HOSPITAL(S)/EXTENDED CARE FACILITIES WITHIN 1000 FEET OF MY FACILITY (STRAIGHT LINE DISTANCE) YES ☐ NO ☒

CERTIFICATION: I certify under penalty of law that I have personally examined and am familiar with the information submitted and believe the submitted information is true, accurate and complete.

Print Name of Owner/Operator BRUCE WALKERPrint Name of Document Preparer STEVE HAMILTONSignature of Owner/Operator Bruce Walker DATE 1/15/90

For Administering Agency Use

Facility ID #:

FULLERTON FIRE DEPARTMENT
CHEMICAL DESCRIPTION FORM

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Reporting Period

1/1 to 12/31 1989

☐ Trade Secret page☒ Non trade Secret page☒ Acutely Hazardous / Radioactive / Carcinogen page

Common Name: PROPANE		CAS #: 74-98-6
Chemical Name: Liquefied Petroleum Gas		DOT #: 1075
PHYSICAL STATE:	Solid: <input type="checkbox"/> Liquid: <input type="checkbox"/> Gas: <input checked="" type="checkbox"/> Pure: <input type="checkbox"/> Mixture: <input type="checkbox"/> Waste: <input type="checkbox"/> Radioactive: <input type="checkbox"/> (if radioactive _____ curies)	If Waste, enter annual amount generated:
WASTE CLASSIFICATION: Enter the State Waste Number (from DHS form 8022, Uniform Hazardous Waste Manifest): _____ (3 digit code)		
PHYSICAL & HEALTH HAZARD CATEGORIES:	PHYSICAL Fire: <input checked="" type="checkbox"/> Reactive: <input type="checkbox"/> Sudden Pressure Release: <input checked="" type="checkbox"/>	HEALTH Immediate Health (Acute): <input checked="" type="checkbox"/> Delayed Health (Chronic): <input type="checkbox"/>
AMOUNT & TIME AT FACILITY:	UNITS OF MEASURE:	Maximum Daily Amount: 300 gal.
	gals <input checked="" type="checkbox"/> lbs <input type="checkbox"/> cu ft <input type="checkbox"/>	Average Daily Amount: 150 gal
	grams <input type="checkbox"/> kg <input type="checkbox"/> _____ <input type="checkbox"/>	# Days per year chemical is on-site: 365
	other (specify)	Largest container on-site (volume): 300 gal.
STORAGE CODES & LOCATIONS: use the codes provided on pages 8 & 9	C P T	Location on site
	A 2 4	South, EAST CORNER of YARD
	L 2 4	Mobile, on Fork lifts (Qty 3)

DANGER

Common Name: SEALER, TOPCOAT 2200-3000		CAS #: 67-63-0
Chemical Name:		DOT #: UN 1263
PHYSICAL STATE:	Solid: <input type="checkbox"/> Liquid: <input checked="" type="checkbox"/> Gas: <input type="checkbox"/> Pure: <input type="checkbox"/> Mixture: <input type="checkbox"/> Waste: <input type="checkbox"/> Radioactive: <input type="checkbox"/> (if radioactive _____ curies)	If Waste, enter annual amount generated:
WASTE CLASSIFICATION: Enter the State Waste Number (from DHS form 8022, Uniform Hazardous Waste Manifest): _____ (3 digit code)		
PHYSICAL & HEALTH HAZARD CATEGORIES:	PHYSICAL Fire: <input checked="" type="checkbox"/> Reactive: <input checked="" type="checkbox"/> Sudden Pressure Release: <input type="checkbox"/>	HEALTH Immediate Health (Acute): <input checked="" type="checkbox"/> Delayed Health (Chronic): <input checked="" type="checkbox"/>
AMOUNT & TIME AT FACILITY:	UNITS OF MEASURE:	Maximum Daily Amount: 1,000 GAL
	gals <input checked="" type="checkbox"/> lbs <input type="checkbox"/> cu ft <input type="checkbox"/>	Average Daily Amount: 500 GAL
	grams <input type="checkbox"/> kg <input type="checkbox"/> _____ <input type="checkbox"/>	# Days per year chemical is on-site: 365
	other (specify)	Largest container on-site (volume): 55 gal DRUM
STORAGE CODES & LOCATIONS: use the codes provided on pages 8 & 9	C P T	Location on site
	D 1 4	AREA #1 STORAGE BERTHS, NORTH END of YARD
	D 1 4	AREA #2 Finishing Room WEST side of Building
	D 1 4	AREA #3 OUT SIDE Finish Room, WEST YARD

For Administering Agency Use
Facility ID #:

FULLERTON FIRE DEPARTMENT
CHEMICAL DESCRIPTION FORM

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Reporting Period
1/1 to 12/31 1989

☐ Trade Secret page

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#3

Common Name: <u>LACQUER THINER, PAINT REDUCER</u>		CAS #: <u>64742-88-7</u>
Chemical Name: <u>PETROLEUM NAPHTHA SOLVENT</u>		DOT #: <u>NA 1263</u>
PHYSICAL STATE:	Solid: <input type="checkbox"/> Liquid: <input checked="" type="checkbox"/> Gas: <input type="checkbox"/> Pure: <input type="checkbox"/> Mixture: <input type="checkbox"/> Waste: <input type="checkbox"/> Radioactive: <input type="checkbox"/> (if radioactive _____ curies)	If Waste, enter annual amount generated: _____
WASTE CLASSIFICATION: Enter the State Waste Number (from DHS form 8022, Uniform Hazardous Waste Manifest): _____ (3 digit code)		
PHYSICAL & HEALTH HAZARD CATEGORIES:	PHYSICAL Fire: <input checked="" type="checkbox"/> Sudden Pressure Release: <input type="checkbox"/> Reactive: <input checked="" type="checkbox"/>	HEALTH Immediate Health (Acute): <input checked="" type="checkbox"/> Delayed Health (Chronic): <input checked="" type="checkbox"/>
AMOUNT & TIME AT FACILITY:	UNITS OF MEASURE: gals <input checked="" type="checkbox"/> lbs <input type="checkbox"/> cu ft <input type="checkbox"/> grams <input type="checkbox"/> kg <input type="checkbox"/> other (specify) _____	Maximum Daily Amount: <u>265 GAL.</u> Average Daily Amount: <u>150 GAL.</u> # Days per year chemical is on-site: <u>365</u> Largest container on-site (volume): <u>55 gal DRUM</u>
	Location on site	
	STORAGE CODES & LOCATIONS: use the codes provided on pages 8 & 9	
	C P T <u>D 1 4</u> AREA #1 STORAGE BERMS, NORTH END OF YARD <u>D 1 4</u> AREA #2 FINISHING ROOM WEST SIDE OF BUILD <u>D 1 4</u> AREA #3 OUTSIDE FINISHING ROOM, WEST SIDE IN YARD	

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#4

Common Name: <u>OIL BASE STAIN 2500 BASE</u>		CAS #: <u>64742-88-7</u>
Chemical Name: <u>PETROLEUM NAPHTHA BASE</u>		DOT #: <u>UN -1263</u>
PHYSICAL STATE:	Solid: <input type="checkbox"/> Liquid: <input checked="" type="checkbox"/> Gas: <input type="checkbox"/> Pure: <input type="checkbox"/> Mixture: <input type="checkbox"/> Waste: <input type="checkbox"/> Radioactive: <input type="checkbox"/> (if radioactive _____ curies)	If Waste, enter annual amount generated: _____
WASTE CLASSIFICATION: Enter the State Waste Number (from DHS form 8022, Uniform Hazardous Waste Manifest): _____ (3 digit code)		
PHYSICAL & HEALTH HAZARD CATEGORIES:	PHYSICAL Fire: <input checked="" type="checkbox"/> Sudden Pressure Release: <input type="checkbox"/> Reactive: <input type="checkbox"/>	HEALTH Immediate Health (Acute): <input checked="" type="checkbox"/> Delayed Health (Chronic): <input checked="" type="checkbox"/>
AMOUNT & TIME AT FACILITY:	UNITS OF MEASURE: gals <input checked="" type="checkbox"/> lbs <input type="checkbox"/> cu ft <input type="checkbox"/> grams <input type="checkbox"/> kg <input type="checkbox"/> other (specify) _____	Maximum Daily Amount: <u>1000 gal</u> Average Daily Amount: <u>500 GAL</u> # Days per year chemical is on-site: <u>365</u> Largest container on-site (volume): <u>55 gal DRUM</u>
	Location on site	
	STORAGE CODES & LOCATIONS: use the codes provided on pages 8 & 9	
	C P T <u>D 1 4</u> AREA #1 STORAGE BERMS, NORTH END OF YARD <u>D 1 4</u> AREA #2 FINISHING ROOM, WEST SIDE OF BUILDING <u>D 1 4</u> AREA #3 OUTSIDE FINISH ROOM, WEST SIDE OF YARD	

FULLERTON FIRE DEPARTMENT
BUSINESS EMERGENCY PLAN

PART V BUSINESS SITE PLAN

A. SITE LAYOUT MAP

FACILITY ADDRESS:

number

street

city

1551

2. ORANGETHORPE

FULLERTON

STATE COLLEGE

ORANGETHORPE AVENUE

